FEC FORM 2 STATEMENT OF CANDIDACY

RECEIVED

1.	(a) Name of Candidate (in full)		2015 JAN 12 1	7112: 10		
	Virginia Ann Foxx	<u></u>		0-1175		
	(b) Address (number and street)	Check if address change	FEC MAIL			
	11468 NC Hwy 105 (c) City, State, and ZIP Code			C0038674		· — Amandad
	Banner Elk, NC 28604				New (N)	OR (A)
4	Party Affiliation	5. Office Sought	6. State & District			
٦.	Republican	US House of Representatives				
	n F	SIGNATION OF PRINCIPA	I CAMPAIGN	COMMITTE	 F	*
7.		med political committee as my Principa		tee for the	5 I /	election(s).
	NOTE: This designation should be	filed with the appropriate office listed in	n the instructions.			
	(a) Name of Committee (in full)					
	∜irginia Foxx for Co	ongress				
	(b) Address (number and street)					
	P.O. Box 2676			•		
	(c) City, State, and ZIP Code					
	Boone, NC 28607					
		SIGNATION OF OTHER A	UTHORIZED C	OMMITTEE	S	
		ESIGNATION OF OTHER A			S .	
8.	DE		sing Representatives)		unds on behalf of my
8.	DE I hereby authorize the following nar candidacy.	(Including Joint Fundrai	sing Representatives cipal campaign comm)		unds on behalf of my
8.	DE I hereby authorize the following nar candidacy.	(Including Joint Fundrai med committee, which is NOT my prind	sing Representatives cipal campaign comm)		unds on behalf of my
8.	I hereby authorize the following nar candidacy. NOTE: This designation should be	(Including Joint Fundrai med committee, which is NOT my prind	sing Representatives cipal campaign comm)		unds on behalf of my
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FEC FORM 2 (REV. 12/2008)

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Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
PREPARER	///2/15 DATE PREPARED
(8/2013)	